570082075

FEC FORM 2 STATEMENT OF CANDIDACY

SECRETARY OF THE SENATE

1. (a) Name of Candidate (in full)			11	FFP 25 Du -
Kelly A. Ayotte			• • •	FEB 25 PH 1: 43
(b) Address (number and street	nd street) X Check if address changed		2. Identification Number	
P.O. Box 937		,	S0NH00235	
(c) City, State and ZIP Code			3. Is This	New X Amended
Manchester .	NH .	03105-0937	Statement	(N) OR (A)
4. Party Affiliation	5. Office Sought		strict of Candidate	
REPUBLICAN PARTY	Senate	NH 00)	
D	ESIGNATION OF PRI	NCIPAL CAMPAIGN	COMMITTEE	
7. I hereby designate the following nam	ned political committee as my Pr	incipal Campaign Committee	for the 2016 (year of e	
NOTE:This designation should	be filed with the appropriate	office listed in the instruction	ons.	
(a) Name of Committee (in full)				
Friends of Kelly Ayotte	·			•
(b) Address (number and street	,		-	
P.O. Box 937	****			
(c) City, State and ZIP Code				
				•
		int Fundraising Represent	atives)	
B. I hereby authorize the following nam- candidacy.	DESIGNATION OF OTH (Including Joined committee, which is NOT my	HER AUTHORIZED (int Fundraising Represent y principal campaign committe	atives)	d funds on behalf of my
D 8. I hereby authorize the following nam	DESIGNATION OF OTH (Including Joined committee, which is NOT my	HER AUTHORIZED (int Fundraising Represent y principal campaign committe	atives)	d funds on behalf of my
B. I hereby authorize the following nam- candidacy.	DESIGNATION OF OTH (Including Joined committee, which is NOT my	HER AUTHORIZED (int Fundraising Represent y principal campaign committe	atives)	d funds on behalf of my
B. I hereby authorize the following name candidacy. NOTE:This designation should in the case of the	DESIGNATION OF OTH (Including Joined committee, which is NOT my	HER AUTHORIZED (int Fundraising Represent y principal campaign committe	atives)	d funds on behalf of my
3. I hereby authorize the following nam candidacy. NOTE:This designation should (a) Name of Committee (in full)	DESIGNATION OF OTH (Including Joined committee, which is NOT my be filed with the principal can	HER AUTHORIZED (int Fundraising Represent y principal campaign committe	atives)	d funds on behalf of my
B. I hereby authorize the following name candidacy. NOTE:This designation should in the case of the	DESIGNATION OF OTH (Including Joined committee, which is NOT my be filed with the principal can	HER AUTHORIZED (int Fundraising Represent y principal campaign committe	atives)	d funds on behalf of my
B. I hereby authorize the following nam candidacy. NOTE:This designation should (a) Name of Committee (in full)	DESIGNATION OF OTH (Including Joined committee, which is NOT my be filed with the principal can	HER AUTHORIZED (int Fundraising Represent y principal campaign committe	atives)	d funds on behalf of my
8. I hereby authorize the following nam candidacy. NOTE:This designation should (a) Name of Committee (in full) (b) Address (number and street)	DESIGNATION OF OTH (Including Joined committee, which is NOT my be filed with the principal can	HER AUTHORIZED (int Fundraising Represent y principal campaign committe	atives)	d funds on behalf of my
B. I hereby authorize the following nam candidacy. NOTE:This designation should (a) Name of Committee (in full)	DESIGNATION OF OTH (Including Joined committee, which is NOT my be filed with the principal can	HER AUTHORIZED (int Fundraising Represent y principal campaign committe	atives)	d funds on behalf of my
8. I hereby authorize the following nam candidacy. NOTE:This designation should (a) Name of Committee (in full) (b) Address (number and street)	DESIGNATION OF OTH (Including Joined committee, which is NOT my be filed with the principal can	HER AUTHORIZED (int Fundraising Represent y principal campaign committe	atives)	d funds on behalf of my
8. I hereby authorize the following name candidacy. NOTE:This designation should (a) Name of Committee (in full) (b) Address (number and street (c) City, State and ZIP Code	DESIGNATION OF OTH (Including Joined committee, which is NOT my be filed with the principal can	HER AUTHORIZED (int Fundraising Represent) y principal campaign committe npaign committee.	atives) ee, to receive and expen	
8. I hereby authorize the following name candidacy. NOTE:This designation should in the case of Committee (in full) (b) Address (number and street in the case of Committee) (c) City, State and ZIP Code	DESIGNATION OF OTH (Including Joined committee, which is NOT my be filed with the principal can	HER AUTHORIZED (int Fundraising Represent) y principal campaign committe npaign committee.	atives) ee, to receive and expen	
B. I hereby authorize the following name candidacy. NOTE:This designation should (a) Name of Committee (in full) (b) Address (number and street) (c) City, State and ZIP Code	DESIGNATION OF OTH (Including Joined committee, which is NOT my be filed with the principal can	HER AUTHORIZED (int Fundraising Represent) y principal campaign committe npaign committee.	atives) ee, to receive and expen	e, correct, and complete.
B. I hereby authorize the following name candidacy. NOTE:This designation should (a) Name of Committee (in full) (b) Address (number and street) (c) City, State and ZIP Code	DESIGNATION OF OTH (Including Joined committee, which is NOT my be filed with the principal can	HER AUTHORIZED (int Fundraising Represent) y principal campaign committe npaign committee.	atives) ee, to receive and expended and belief it is true Date	e, correct, and complete.
8. I hereby authorize the following name candidacy. NOTE:This designation should (a) Name of Committee (in full) (b) Address (number and street) (c) City, State and ZIP Code I certify that I have of Candidate	DESIGNATION OF OTH (Including Joined committee, which is NOT my be filed with the principal can examined this Statement and	HER AUTHORIZED (int Fundraising Represent y principal campaign committee.)	atives) ee, to receive and expended and belief it is true Date 2/25/1	e, correct, and complete.
8. I hereby authorize the following name candidacy. NOTE:This designation should (a) Name of Committee (in full) (b) Address (number and street) (c) City, State and ZIP Code I certify that I have of Candidate	DESIGNATION OF OTH (Including Joined committee, which is NOT my be filed with the principal can examined this Statement and	HER AUTHORIZED (int Fundraising Represent y principal campaign committee.)	atives) ee, to receive and expended and belief it is true Date 2/25/1	e, correct, and complete.
8. I hereby authorize the following nam- candidacy. NOTE:This designation should (a) Name of Committee (in full) (b) Address (number and street	DESIGNATION OF OTH (Including Joined committee, which is NOT my be filed with the principal can examined this Statement and	HER AUTHORIZED (int Fundraising Represent y principal campaign committee.)	atives) ee, to receive and expended and belief it is true Date 2/25/1	e, correct, and complete.

DANA K. MCCALLUM SUPERINTENDENT

HART SENATE OFFICE BUILDING SUITE 232 WASHINGTON, DC 20510-7116 PHONE: (202) 224-0322

United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

THE PRECEDING DOCUMENT WAS:	•
HAND DELIVERED 12-25-11 Date of Reco	eipt
USPS FIRST CLASS MAIL	
Post	tmark
USPS REGISTERED/CERTIFIED Post	tmark
USPS PRIORITY MAIL	
Post DELIVERY CONFIRMATION OR SIGNATURE CO	mark ONFIRMATION LABEL
USPS EXPRESS MAILPost	mark
OVERNIGHT DELIVERY SERVICE: SHIPPING DATE	NEXT BUSINESS DAY DELIVERY
FEDERAL EXPRESS	
UPS	
DHL	
AIRBORNE EXPRESS	
RECEIVED FROM FEDERAL ELECTION	COMMISSION
POSTMARK ILLEGIBLE NO	POSTMARK [
FAXDate of Receipt	 _
OTHER	
Date of Receipt or Postm	nark
PDER A DED	DATE DDDD DED (1) 20 25 //





